





DISCOUNT PRICE DEADLINE DATE SEPTEMBER 6, 2016

INCLUDE THE FREEMAN METHOD OF PAYMENT FORM WITH YOUR ORDER

NAME OF SHOW: OTTA	WA FA	LL HO	ME SHOW	N 2016	
COMPANY NAME:	BOOTH #:				
CONTACT NAME:	: PHONE #:				
E-MAIL ADDRESS:					
For Assistance, please call 613-748-7180 to speak with	one of o	ur experts.			
For fast, easy or	dering, go	to www.fre	emanco.com/	store	
Compressed Air				Additional Information	
	Discount <u>Price</u>	Standard Price	TOTAL	To honor the Discount Price your order must be remit- ted with payment by the above noted deadline date. Only an authorized FREEMAN qualified representa- tive is permitted to make a connection to any of the facil-	
0 to 4 cu.ft. per min. (40-1-1)	\$313.25	\$ 438 55 :	=\$	ity's mechanical services sources or termination points.	
5 to 10 cu.ft. per min. (40-1-10)	\$461.50	\$ 646.10 =		No mechanical equipment shall be restarted after failure until a FREEMAN qualified representative has found and	
11 to 20 cu.ft. per min. (40-1-11)	\$676.50		\$ =\$	corrected the malfunction. Service Charges may apply.	
			=\$	and accompanied by fax and/or email notification. A 50% refund	
24hrs Continuous Service (40-1-20)	\$ 82.75		=\$	will be applied on standard listed items on this form if cancelled less than [2] days prior to installation. No refund is applicable	
		•		to installed services, cancelled on-site, and/or special order items (ie. 208 volt, 220 volt, transformers, generators, com-	
Natural Gas Initial 1/2" connection to booth (40-1-200)	\$384.50	\$538.30 :	=\$	pressed air, natural gas, water fill & drain, hot water tanks, etc).	
Additional connection to booth (40-1-200)	BY QUOT		• =\$	Service rates quoted include installation to the back centre wall of booth area, services while in use, and removal. If required elsewhere	
			•	in the booth, a scaled floor plan must be included with orders indicating desired location. Additional labour and material charges may apply.	
24hrs Continuous Service (40-1-106)	\$ 82.75	\$ 115.85		All services are turned prior to show open-	
Your Natural Gas order must be accompanied by the no later than 10 days prior to the exhibitor m				ing and turned off after show closes on show days. If you require 24hr service operation, please indicate.	
Water				Natural Gas in available in limited quantity and in specific	
				limited locations. Use of Propane as an alternate fuel may	
Fill and Drain container up to 1000 gallons (40-3-14)	\$277.25	\$388.15	=\$	ment rules and regulations. For more information, please contact the facility prior to placing your Natural Gas order.	
Fill and Drain container up to 5000 gallons (40-3-15)	\$415.00				
Fill and Drain container exceeding 5000 gallons (40-3-16)	\$519.00		=\$	regulations/codes/standards and the manufacturer's certi-	
1/2" Valved cold water connection to booth (40-2-1)	\$347.50		=\$	Certificate/letter from the 135A (reclinical Standards and	
Drain connector to booth (gravity) minimum (40-3-17)	\$247.25		=\$	not be supplied for any variance unless the above documen-	
Drain connector to booth (pumped) minimum (40-3-18)	\$365.00		=\$	tation has been provided and TSSA inspection has been completed. The TSSA may be contacted at 1-877-682-8772.	
Additional air, water, or drain outlets (40-2-2)	\$147.50		•	- All electrical equipment shall have a nameplate attached	
Hot Water Tank - [6] imperial gallons (40-2-12)	BY QUO		=\$	thereto showing the operating voltage, phase, hertz, horsepower, kilowatts, full load, and AC or DC current.	
Hot Water Tank - [40] imperial gallons (40-2-13)	BY QUO		=\$	- Disputes/Claims: All disputes and claims	
24hrs Continuous Service (40-3-20)	\$160.00	\$224.00	=⊅	must be settled prior to the official exhibit closing.	
SPECIAL REQUIREMENTS				TOTAL COST	
				SUBTOTAL \$	
				13% HST Tax \$	
Please don't hesitate to contact us at 613-748-7180 or <u>freemanottawaES@freemanco.</u>			HST# R101889426		
com if you require any additional / special services and/or	informati	on.		GRAND TOTAL \$	
SPECIAL REQUIREMENT:				Please include complete Method Of Payment	
		=:	\$	Please include complete Method Of Payment and/or Third Party Authorization with this form for processing.	
		=;	\$		
		=:	\$		